

ORIGINAL

23 / "Folwell"

ADDRESS

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(GREETINGS TO HOSTS, GUESTS, FRIENDS, ETC.)

ALMOST SIX YEARS AGO, IN JUNE 1981, THE PUBLIC HEALTH SERVICE PEOPLE IN ATLANTA WHO COLLECT INFORMATION FROM STATE HEALTH AGENCIES BEGAN TO GET SOME RATHER ALARMING REPORTS. THEY WERE TOLD OF A HANDFUL OF CASES OF PNEUMOCYSTIS CARINII PNEUMONIA. JUST A FEW CASES WERE REPORTED...BUT THIS LETHAL DISEASE IS SO RARE THAT A HANDFUL OF CASES IN A SINGLE YEAR IS LIKE AN EPIDEMIC.

OUR PEOPLE INVESTIGATED FURTHER AND THE TRAIL LED TO MANY PEOPLE WHO, FOR SOME MYSTERIOUS REASON, WERE SICK AND THEIR BODIES WERE NOT FIGHTING BACK AS YOU'D EXPECT THEM TO. AS A RESULT, THEY WERE NOT ONLY SICK WITH THIS VERY DANGEROUS FORM OF INFECTIOUS PNEUMONIA, THEY WERE DYING FROM IT AND NO ONE KNEW WHY.

IT APPEARED THAT SOME KIND OF "BUG" -- A VIRUS, MOST LIKELY -- WAS ATTACKING AND DESTROYING THE NATURAL IMMUNE SYSTEMS OF THESE VICTIMS.

THE VIRUS ITSELF WAS NOT KILLING PEOPLE; PEOPLE WERE DYING OF EXTREMELY VIRULENT DISEASES BECAUSE THE AIDS VIRUS PREVENTED THE BODY FROM FIGHTING THEM OFF.

UNTIL THE AIDS VIRUS CAME ALONG, NOBODY IN PUBLIC HEALTH AND MEDICINE HAD SEEN A SYNDROME QUITE LIKE THIS AND NO ONE WAS SURE HOW IT WAS ACQUIRED.

WE GAVE IT A NAME IN ORDER TO TRACK IT BETTER. WE CALLED IT THE "ACQUIRED IMMUNE DEFICIENCY SYNDROME." TO SIMPLIFY MATTERS, WE JUST BEGAN TO REFER TO THE INITIALS, A.I.D.S., OR "AIDS."

AND IT'S BEEN AIDS EVER SINCE.

YOU'VE READ THE STORIES AND SEEN IT ON TELEVISION, I'M SURE, SO I WON'T GO THROUGH THE ENTIRE 6-YEAR HISTORY ALL OVER AGAIN. INSTEAD, I'LL JUST TOUCH ON A FEW KEY POINTS:

FIRST OF ALL, WE'RE TALKING ABOUT A DISEASE THAT IS SPREADING. THE NUMBER OF VICTIMS IS DOUBLING IN LITTLE MORE THAN A YEAR. FOR EXAMPLE, AS OF JANUARY 1986, WE HAD A CUMULATIVE TOTAL OF 16,000 REPORTED CASES.

TODAY THAT TOTAL IS 30,000. BY THE WAY, OVER HALF OF THEM HAVE ALREADY DIED OF THE DISEASE...AND THE REST WILL.

LAST YEAR WE HAD OVER 13,000 NEW CASES ADDED TO THE TOTAL. THIS YEAR WE EXPECT ANOTHER 23,000 NEW CASES.

BY THE END OF 1990 THE CUMULATIVE TOTAL WILL BE CLOSE TO 270,000.

MAKE NO MISTAKE ABOUT IT. AIDS IS SPREADING AMONG MORE PEOPLE... AND IT IS FATAL.

SECOND POINT: EVEN THOUGH SCIENTISTS HAVE HAD A LOOK AT THE AIDS VIRUS, WE DON'T REALLY KNOW WHAT IT IS. AND UNLESS WE KNOW THAT, WE HAVE NO WAY OF STOPPING IT. YES, WE'RE MAKING PROGRESS IN THE RESEARCH EFFORT, BUT IT'S VERY SLOW GOING.

PEOPLE ASK ME, "DR. KOOP, WHEN CAN WE EXPECT AN EFFECTIVE VACCINE TO BE AVAILABLE?" AND I HAVE TO TELL THEM THAT I DON'T SEE ONE IN THE FORESEEABLE FUTURE.. IT TOOK 19 YEARS TO DEVELOP THE HEPATITIS B VACCINE AND THAT WAS A COMPARATIVELY EASY VIRUS TO UNDERSTAND.

VACCINE DEVELOPMENT IS ALSO A VERY DIFFICULT SCIENTIFIC ACHIEVEMENT. IF NOT PRODUCED WITH GREAT CARE, A VACCINE CAN CAUSE AS MUCH ILLNESS AND DEATH AS THE DISEASE IT'S SUPPOSED TO ATTACK.

THAT'S THE CASE WHEN WE KNOW ALL ABOUT A DISEASE. WE KNOW JUST A FEW THINGS ABOUT AIDS...AND NOT ENOUGH TO STOP IT.

THIRD POINT: BUT WE DO KNOW WITH COMPLETE CERTAINTY THAT THE AIDS VIRUS IS TRANSMITTED FROM ONE PERSON TO ANOTHER EITHER IN BLOOD OR IN SEMEN. IT'S A PECULIAR TRAIT FOR A VIRUS, I'LL ADMIT. BUT THERE IT IS.

THIS IS CLEARLY THE MOST SERIOUS PIECE OF INFORMATION WE HAVE SO FAR. IT EXPLAINS, FOR EXAMPLE, WHY SOME 17 PERCENT OF ALL AIDS CASES THUS FAR ARE MEN -AND WOMEN WHO ABUSE DRUGS USING AN INTRAVENOUS NEEDLE, PARTICULARLY A USED, DIRTY NEEDLE THEY'VE BORROWED FROM

ANOTHER DRUG USER WHO ALREADY HAS AIDS. IN THE PAST YEAR THE PROPORTIONATE NUMBER OF AIDS CASES AMONG I.V. DRUG ABUSERS HAS INCREASED SUBSTANTIALLY.

IT ALSO EXPLAINS WHY THE INITIAL ALARM ABOUT AIDS WAS SOUNDED AMONG HOMOSEXUAL AND BISEXUAL MEN. SOME HOMOSEXUAL SEX PRACTICES NOT ONLY PRODUCE SEMEN BUT MAY ALSO CAUSE SOME BLEEDING...AND THOSE ARE THE ONLY TWO BODY FLUIDS THAT CARRY THE LIVE AIDS VIRUS IN QUANTITIES SUFFICIENT TO BE TRANSMISSABLE.

WHEN WE FIRST BEGAN TO CONFRONT THE AIDS EPIDEMIC, THE PEOPLE AT HIGHEST RISK WERE HOMOSEXUAL AND BISEXUAL MEN. I'M AFRAID THEY STILL ARE, EVEN THOUGH SOME FAR-REACHING CHANGES HAVE TAKEN PLACE AMONG HOMOSEXUAL MEN, WHO HAVE BECOME MUCH MORE CAUTIOUS ABOUT THEIR SEXUAL PRACTICES.

BUT WE ALSO HAVE REPORTS OF THE AIDS VIRUS OCCURRING AMONG HETEROSEXUAL MEN AND WOMEN WHO ARE NOT I.V. DRUG ABUSERS. IN FACT, THEIR HETEROSEXUAL ACTIVITY SEEMS TO BE THEIR ONLY RISK FACTOR.

AS OF LAST WEEK, ALMOST 4 PERCENT OF ALL REPORTED AIDS CASES HAVE BEEN HETEROSEXUAL MEN AND WOMEN...A PERCENTAGE, BY THE WAY, THAT'S GOING UP VERY RAPIDLY.

AS I MENTIONED EARLIER, THE NUMBERS OF AIDS CASES WILL INCREASE

ABOUT 9-FOLD BETWEEN NOW AND THE YEAR 1991. BUT THE NUMBER OF AIDS CASES INVOLVING HETEROSEXUAL PERSONS WILL INCREASE ABOUT 20-FOLD.

OVER THE PAST 5 YEARS, WHEN IT LOOKED AS IF THE KEY GROUP AT RISK WERE HOMOSEXUAL AND BISEXUAL MEN, WE BEAMED TO THEM VIRTUALLY ALL OUR INFORMATION AND EDUCATION EFFORTS. AND IT WAS EFFECTIVE...THINGS HAVECHANGED.

BUT NOW THAT WE SEE THE RISE IN THIS DISEASE OCCURRING AMONG HETEROSEXUAL MEN AND WOMEN, WE NEED TO DIRECT OUR INFORMATION AND EDUCATION EFFORTS OUT TO THE WHOLE SOCIETY.

I THINK YOU WOULD AGREE THAT, IF WE HAD TO MAKE SOME CHOICES AND SET SOME PRIORITIES, WE WOULD ELECT TO DO THE BEST JOB WE COULD TO INFORM OUR YOUNG PEOPLE ABOUT THE DANGERS OF AIDS. HETEROSEXUAL YOUNG PEOPLE ARE NOT ONLY AT HIGH RISK, BUT THEIR SEXUAL ACTIVITY OVER A LONG PERIOD OF TIME WILL REALLY DETERMINE WHETHER OUR SOCIETY CAN SURVIVE THIS DEVASTATING DISEASE...OR NOT.

AND THIS IS THE DIFFICULT PART. WHAT WE'VE BEEN DOING, THEN, IS SORTING OUT THE INFORMATION THAT EVERYONE -- YOUNG OR OLD -- OUGHT TO KNOW ABOUT AIDS. AND OUR PRIORITY IS TO FOCUS ON THE INFORMATION THAT YOUNG PEOPLE IN PARTICULAR OUGHT TO KNOW.

FIRST, FOR EXAMPLE, WE NEED TO IMPLANT A FEW LIFE-SAVING MESSAGES INTO THE CONSCIOUSNESS OF SEXUALLY ACTIVE PEOPLE -- AND THAT CAN MEAN ANY MALE OR FEMALE PERSON BETWEEN THE AGES OF 12 AND 80.

I HAVE JUST TWO MESSAGES IN MIND. THE FIRST ONE IS SIMPLE ENOUGH:

FIND SOMEONE WHO IS WORTHY OF YOUR RESPECT AND YOUR LOVE...GIVE THAT PERSON BOTH...AND STAY FAITHFUL TO HIM OR HER.

IN OTHER WORDS, SHORT OF TOTAL ABSTINENCE, THE BEST DEFENSE AGAINST AIDS IS TO MAINTAIN A FAITHFUL, MONOGAMOUS RELATIONSHIP, IN WHICH YOU HAVE ONLY ONE CONTINUING SEXUAL PARTNER...AND THAT PERSON IS AS FAITHFUL AS YOU ARE.

MY ADVOCACY OF MONOGAMY MAY SOUND LIKE A MORALITY LESSON, BUT IT ALSO HAPPENS TO BE GOOD SCIENCE. IN CONTAINING THE EPIDEMIC OF AIDS, SCIENCE AND MORALITY ADVANCE HAND-IN-HAND TOWARD THE SAME GOAL.

I HAPPEN TO BELIEVE THAT A FAITHFUL, MONOGAMOUS RELATIONSHIP IS ALSO A PERSON'S BEST DEFENSE NOT ONLY AGAINST AIDS AND OTHER SEXUALLY TRANSMITTED DISEASES, SUCH AS HERPES AND GONORRHEA, BUT ALSO AGAINST MANY OTHER OF LIFE'S NEGATIVE EXPERIENCES:

A DISAPPOINTMENT IN ONE'S JOB...THE INFIDELITY OF A FRIEND...AND SIMPLE, HUMAN LONELINESS.

THE FIRST MESSAGE, THEN, IS MONOGAMY.

MY SECOND MESSAGE IS FOR PEOPLE WHO DON'T YET HAVE A FAITHFUL MONOGAMOUS RELATIONSHIP FOR WHATEVER REASON. MY MESSAGE IS...
CAUTION: AND FOR THIS AUDIENCE I DON'T NEED BE MORE EXPLICIT.

THIS SECOND MESSAGE ADDS UP TO THE NEED TO KNOW WITH ABSOLUTE CERTAINTY THAT NEITHER YOU NOR YOUR PARTNER IS CARRYING THE AIDS VIRUS. BUT IF YOU ARE NOT ABSOLUTELY CERTAIN, THEN YOU MUST TAKE PRECAUTIONS.

THERE WILL ALWAYS BE PEOPLE WHO WILL NOT BE ABSTINENT OR WILL NOT ACHIEVE A FAITHFUL MONOGAMOUS RELATIONSHIP AND, THEREFORE, WILL EXPOSE THEMSELVES AND OTHERS TO THE AIDS VIRUS.

TO THOSE FOOL-HARDY INDIVIDUALS I RELUCTANTLY SAY THE FOLLOWING:

* DON'T HAVE SEX WITH SOMEONE WHO ALREADY HAS AIDS, THAT OUGHT TO BE CLEAR ENOUGH.

* DON'T HAVE SEX WITH SOMEONE WHO COULD CARRY THE VIRUS OF AIDS ...A PERSON WHO, FOR EXAMPLE, PRACTICES HIGH-RISK BEHAVIOR. THAT INCLUDES HOMOSEXUALS, INTRAVENOUS DRUG USERS, PROSTITUTES AND OTHER PERSONS WHO HAVE MANY DIFFERENT SEX PARTNERS. OBVIOUSLY THE SAME MESSAGE GOES TO ANY OF THOSE HIGH-RISK INDIVIDUALS.

* AND FINALLY, IF YOU DO DECIDE TO HAVE SEX WITH SUCH AN INDIVIDUAL ANYWAY -- A DECISION THAT COULD HAVE SERIOUS HEALTH CONSEQUENCES -- THEN, IF YOU'RE A MAN, AT LEAST USE A CONDOM FROM START TO FINISH. IF YOU'RE A WOMAN, MAKE SURE YOUR MALE PARTNER USES A CONDOM.

A CONDOM WON'T PROVIDE 100 PERCENT PROTECTION -- FEW THINGS IN LIFE DO -- BUT SO FAR IT SEEMS TO BE THE BEST PROTECTION SHORT OF MONOGAMY.

IF SEXUALLY ACTIVE PEOPLE WILL HEED THESE TWO MESSAGES, THEY WILL ACHIEVE A HIGH DEGREE OF PROTECTION AND WILL MOST LIKELY NOT BE INFECTED WITH THE AIDS VIRUS.

WHAT ELSE CAN WE DO TO COMBAT THIS TERRIBLE DISEASE?

IN MY REPORT ON AIDS, I ALSO ADVISE PEOPLE TO AVOID CERTAIN SPECIFIC SEX PRACTICES INVOLVING PARTNERS WHO ARE AT HIGH RISK. SUCH PRACTICES INCLUDE MOUTH CONTACT WITH THE PENIS, VAGINA, AND RECTUM... ANY PRACTICES WHICH CAN CAUSE CUTS OR TEARS IN THE LININGS OF THE RECTUM, VAGINA, OR PENIS...AND SEX WITH FEMALE OR MALE PROSTITUTES.

I STRONGLY ADVISE YOUNG PEOPLE TO STAY CLEAR OF DRUGS AND ALCOHOL, BECAUSE THESE SUBSTANCES LOWER YOUR ABILITY TO THINK CLEARLY AND PROTECT YOURSELF FROM DANGER...ESPECIALLY THE DANGER OF HAVING SEX WITH AN AIDS-INFECTED PARTNER.

BUT LET ME STOP RIGHT HERE FOR A MOMENT AND FOCUS ON AN ISSUE THAT IS GAINING ALMOST AS MUCH ATTENTION AS THE AIDS VIRUS ITSELF. THE ISSUE IS THE EDUCATION OF OUR YOUNG PEOPLE ABOUT AIDS AND ABOUT SEXUALITY. WHAT SHOULD IT BE? WHO SHOULD DO IT? AND WHEN?

WHEN I TALK TO ADULTS ABOUT THE AIDS PROBLEM AND I MAKE SOME OF THESE DETAILED REFERENCES TO CERTAIN HIGH-RISK SEX PRACTICES, I GET A VARIETY OF REACTIONS: DISMAY, SADNESS, EMBARRASSMENT, DISCOMFORT, OR ANGER.

BUT THE REACTION I GET MOST OFTEN FROM YOUNG PEOPLE IS CURIOSITY AND EAGERNESS FOR MORE KNOWLEDGE. THEY'RE STILL LEARNING OUT ABOUT THEIR BODIES AND THEIR EMOTIONS...THEY'RE STILL UNSURE ABOUT THEIR OWN SEXUALITY... AND THEY STILL HAVE THAT PRICELESS OPTIMISM ABOUT THE WORLD AND THE PEOPLE IN IT, AN OPTIMISM THAT MOST ADULTS HAVE HAD TEMPERED BY THE FACTS OF DAY-TO-DAY LIVING IN THE REAL WORLD.

I PREFER TO SPEAK ABOUT THE NEED FOR "AIDS EDUCATION." AND I TRULY BELIEVE WE NEED SUCH EDUCATION AT THE APPROPRIATE AGE LEVEL IN THE SCHOOLS OF AMERICA.

BUT I ALSO RECOGNIZE THAT, FOR MANY YOUNG PEOPLE, SUCH EDUCATION MAY BE FRIGHTENING...OR PUZZLING...OR BOTH.

HENCE, I BELIEVE THAT THE MOST SIGNIFICANT ACTION OUR SOCIETY MIGHT TAKE TO PROTECT ITS YOUNG PEOPLE FROM THE MORTAL THREAT OF AIDS

IS TO PROVIDE THEM WITH EDUCATION CONCERNING THEIR OWN SEXUALITY THAT IS FACTUALLY CORRECT, PERSONALLY SENSITIVE, AND MORALLY STRONG.

THE TERM "SEX EDUCATION" IS ONE I'M NOT AT ALL COMFORTABLE WITH BECAUSE IT IMMEDIATELY POLARIZES ANY AUDIENCE. ALSO, IN MY VIEW, "SEX EDUCATION" USUALLY MEANS A COURSE OF INSTRUCTION THAT IS MUCH TOO LIMITED. LET ME EXPLAIN WHAT I MEAN BY THAT.

MOST OF THE TIME, WHEN YOU HEAR THE PHRASE, "SEX EDUCATION," YOU IMMEDIATELY THINK OF CLASS HOURS DEVOTED TO HUMAN REPRODUCTIVE BIOLOGY, INCLUDING CAREFULLY PHRASED EXPLANATIONS ABOUT THE USE AND ABUSE OF THE MALE AND FEMALE GENITALIA.

I'M TOLD THAT YOUNG PEOPLE CALL THESE CLASSES "ORGAN RECITALS."

MOST SCHOOLS NOW OFFER THIS MINIMUM KIND OF SEX EDUCATION SOME TIME DURING THE JUNIOR HIGH OR MIDDLE SCHOOL YEARS AND THAT'S A GOOD THING, ALTHOUGH IT MIGHT BE A LITTLE LATE. I PERSONALLY WOULD URGE THAT THE MATERIAL BE PRESENTED EARLIER, AMONG THE 9-, 10-, AND 11-YEAR-OLDS.

OF COURSE, DEVELOPMENTAL AGE IS MORE IMPORTANT THAN CHRONOLOGICAL AGE. ALSO, COMMUNITY STANDARDS, WHICH VARY FROM PLACE TO PLACE, MUST BE TAKEN INTO ACCOUNT.

NEVERTHELESS, CHILDREN FROM FOUR TO SIX ASK QUESTIONS ABOUT SEX

BUT THEY USUALLY INVOLVE WITH THEIR OWN ANATOMY AND THE QUESTION, "WHERE DO BABIES COME FROM?." THEN FOR SEVERAL YEARS, UNTIL ABOUT AGE NINE, CHILDREN SEEM TO LOSE INTEREST IN MATTERS INVOLVING SEX. BUT AT ABOUT AGE NINE A NEW INTEREST DEVELOPS, AND THEIR QUESTIONS -- IF THEY ARE EVEN ASKED -- MAY BE QUITE SOPHISTICATED.

GRADE-SCHOOL CHILDREN ARE EXTREMELY CURIOUS ABOUT THEMSELVES. THEY ARE ALSO KINDER AND MORE GENEROUS THAN OLDER CHILDREN...OR EVEN MOST ADULTS, FOR THAT MATTER. AND THEY ARE, ABOVE ALL, SUSCEPTIBLE TO BEING LOVED AND TO OFFERING MUCH LOVE IN RETURN.

AND SEX EDUCATION WITHOUT THE CONCEPT OF LOVE AND RESPONSIBILITY IS LIKE A PIECE OF PIE THAT'S ALL CRUST AND NO FILLING.

MY OWN PREFERENCE, THEREFORE, WOULD BE TO HAVE OUR ELEMENTARY SCHOOLS INTRODUCE CHILDREN TO THE SUBJECT OF REPRODUCTIVE BIOLOGY WITHIN A MORE GENERAL DISCUSSION OF THE NATURE OF SENSITIVE AND AFFIRMATIVE HUMAN RELATIONS.

THAT'S EASIER TO SAY THAN TO DO, I KNOW. AND FURTHERMORE, SOME PARENTS GET UNEASY ABOUT HAVING SCHOOL IMPART CERTAIN HUMAN VALUES TO THEIR CHILDREN. THEY THINK THAT SUCH INSTRUCTION SHOULD BE DONE AT HOME.

AND I AGREE. I ALWAYS HAVE, AND THIS GOES BACK MANY YEARS DURING ALL THE TIME I PRACTICED MEDICINE. MY ADVICE TO PARENTS WAS ALWAYS THE SAME:

THE SOCIAL AND SPIRITUAL DEVELOPMENT OF YOUR CHILDREN IS YOUR BUSINESS. DON'T PASS IT UP...DON'T PASS IT BY...PASS IT ON.

AND PARENTS WOULD AGREE WITH ME 100 PERCENT. BUT MOST OF THEM, I HAVE TO CONFESS, NEVER DID MUCH MORE THAN AGREE WITH ME.

THAT'S BEEN A DISAPPOINTMENT, AND LATELY, IN LIGHT OF THE AIDS PROBLEM, I'VE WONDERED WHY THIS WAS SO.

I DON'T HAVE THE ULTIMATE ANSWER. BUT I DO I HAVE A FEELING ABOUT THE NATURE OF THE PROBLEM.

AS AN INDIVIDUAL...A FATHER AND A GRANDFATHER...AND AS A PHYSICIAN WITH 50 YEARS' EXPERIENCE -- 40 OF THOSE IN PEDIATRICS -- I HOLD A FIRM COMMITMENT TO THE FAMILY AND TO PARENTAL AUTHORITY. IN THE COURSE OF PROVIDING AND SUPERVISING THE CARE FOR 100,000 CHILDREN, I DEVELOPED A PRETTY CLEAR UNDERSTANDING OF THE SIMILARITIES AND DIS-SIMILARITIES AMONG CHILDREN, AS WELL AS THE NEED FOR FLEXIBILITY IN ANY PROGRAM THAT IS AIMED IN THEIR DIRECTION.

FIRST OF ALL, I ENCOURAGE PARENTS TO TALK OPENLY, CLEARLY, AND AFFIRMATIVELY WITH YOUNG PEOPLE ABOUT THEIR DEVELOPING PHYSIOLOGY.

YOU KNOW, IT'S NOT VERY COMPLICATED, AND, IN ANY CASE, EXTERNAL GENITALIA ARE QUITE VISIBLE TO THE CHILDREN WHO OWN THEM. THEY'RE NOT LIKE MOST OTHER VITAL ORGANS, SUCH AS THE LIVER AND THE KIDNEY, WHICH ARE HIDDEN INSIDE AND ARE A TOTAL MYSTERY TO MOST YOUNGSTERS. AND TO A GREAT MANY ADULTS, TOO, FOR THAT MATTER.

BUT, REGARDLESS OF WHAT I SAY ABOUT ITS SIMPLICITY, MANY PARENTS DO HAVE TROUBLE DEALING WITH THE FACTS OF PHYSIOLOGY AND BIOLOGY IN THE COURSE OF EXPLAINING SEXUALITY. THEY DON'T FEEL UP TO HANDLING THE SCIENTIFIC MATERIAL. AND THEY CONFESS TO NOT KNOWING THE PROPER NAME FOR THIS AND THE PROPER FUNCTION OF THAT.

WE MAY GET IMPATIENT WITH PARENTS WHO PLEAD IGNORANCE, BUT THE FACT IS THAT THEY DIDN'T GET ANY OF THIS INFORMATION WHEN THEY WERE KIDS EITHER.

A SECOND REASON PARENTS HAVE TROUBLE TALKING TO THEIR CHILDREN ABOUT SEX IS THAT SUCH A CONVERSATION HAS ALL THE EARMARKS OF AN INVASION OF PRIVACY -- THEIR OWN PRIVACY AS WELL AS THEIR CHILDREN'S.

INVASION OF A CHILD'S PRIVACY CAN BE AVOIDED IF THESE DISCUSSIONS TAKE PLACE BEFORE ADOLESCENCE.

THE SUBJECT-MATTER INVOLVES THINGS THAT GO ON IN BEDROOMS AND BATHROOMS...THE ONLY TWO ROOMS IN MOST HOMES, BY THE WAY, THAT PEOPLE HONOR AS TRULY PRIVATE. SO PARENTS BECOME VERY UNCOMFORTABLE, AND

THEY DON'T DISCUSS HUMAN SEXUALITY WITH THEIR CHILDREN TO THE EXTENT TO WHICH I THINK THEY MUST.

OF COURSE, THE SAME EMBARRASSMENT AND LACK OF INFORMATION PREVENTS PARENTS FROM TALKING TO EACH OTHER ABOUT THEIR SEXUALITY, ALSO.

THEY FEEL FRUSTRATED, GUILTY, AND EVEN ANGRY ABOUT THEIR INABILITY TO DO THE THING THAT THEY KNOW -- INTELLECTUALLY -- THEY SHOULD DO.

BUT THEY CAN'T. AND I'M SORRY THAT THAT'S THE WAY IT IS FOR MANY PARENTS...AND MAYBE FOR MOST PARENTS.

SO BIOLOGY AND PRIVACY ARE TWO REASONS WHY PARENTS HAVE A HARD TIME WITH "SEX EDUCATION." BUT THERE'S A THIRD REASON, ALSO, WHICH MAY WELL BE THE MOST IMPORTANT REASON OF ALL AND THE MOST DIFFICULT ONE TO DEAL WITH. IT HAS TO DO WITH THE NATURE AND THE QUALITY OF OUR ADULT HUMAN RELATIONSHIPS.

AS I INDICATED EARLIER, "SEX EDUCATION" MEANS MORE TO ME THAN JUST ANOTHER "ORGAN RECITAL." "SEX EDUCATION" OUGHT TO DEAL WITH RELATIONSHIPS BETWEEN MEN AND WOMEN THAT ARE LOVING, CARING, RESPECTFUL, AND TOLERANT.

SUCH RELATIONSHIPS INCLUDE SOME FULFILLING SEXUAL ACTIVITY, BUT THEY ARE NOT DEFINED ONLY BY THAT ACTIVITY. THERE'S MUCH MORE TO HUMAN RELATIONSHIPS THAN JUST "GOOD SEX." AND YOUNG PEOPLE OUGHT TO BE ADVISED OF THAT.

FOR MOST ADULTS, A SATISFYING RELATIONSHIP HOLDS IN A COMFORTABLE BALANCE THE EMOTIONAL AND INTELLECTUAL FACTORS, AS WELL AS THE PHYSICAL AND SEXUAL FACTORS OF THAT RELATIONSHIP.

EVERYONE DREAMS OF SUCH A RELATIONSHIP. IF WE MEET A MAN OR WOMAN WITH THAT KIND OF POTENTIAL, WE GLADLY GIVE HIM OR HER OUR LIFELONG PROMISE.

NOVELISTS CALL THAT "TRUE LOVE." SOCIOLOGISTS CALL IT "MARITAL FIDELITY." THE SURGEON GENERAL CALLS IT "MONOGAMY." BUT WHATEVER YOU CALL IT, WE ALL WANT THAT KIND OF WELL-ROUNDED, BALANCED, LOVING, AND FULLY CONSIDERATE RELATIONSHIP...ONE THAT IS ENRICHED BY SEX, NOT OVERWHELMED BY IT OR DEVOID OF IT EITHER.

FOR MANY PEOPLE, SUCH A BALANCED RELATIONSHIP IS AN IDEAL...BUT "REAL LIFE" ISN'T ALWAYS LIKE THAT, AND SO THEY HAVE DIFFICULTY CONVEYING THESE IDEALS TO THEIR CHILDREN.

GROWN-UPS KNOW ABOUT HUMAN IMPERFECTION. BUT CHILDREN DON'T.

AND GROWN-UPS CAN DEAL WITH HUMAN IMPERFECTION. BUT CHILDREN

AND GROWN-UPS CAN DEAL WITH HUMAN IMPERFECTION. BUT CHILDREN CAN'T...UNLESS WE HELP THEM.

WITHOUT A COMPASSIONATE UNDERSTANDING OF THE IMPERFECT NATURE OF MANY HUMAN RELATIONSHIPS, A CHILD'S EDUCATION WILL BE...ITSELF...VERY IMPERFECT.

SO IF PARENTS ARE TO EDUCATE THEIR CHILDREN ABOUT HUMAN RELATIONSHIPS -- SEXUAL AND OTHERWISE -- THEY MUST FIRST UNDERSTAND AND ACCEPT THE NATURE OF THEIR OWN. FOR MANY OF US, THAT'S HARD TO DO.

AND THEN THEY MUST BE ABLE TO TELL THEIR CHILDREN ABOUT THAT RELATIONSHIP. I'D LIKE PARENTS TO DO THIS WITH COMPASSION, WITH RESPECT AND LOVE, AND WITH SOME UNDERSTANDING NOT JUST OF THE CHILD WHO IS LISTENING...BUT ALSO OF THE ADULT WHO IS SPEAKING. AND THAT'S EVEN HARDER TO DO.

I'M SHARING THESE THOUGHTS WITH YOU TODAY BECAUSE I WANT YOU TO KNOW THAT MY DEEPEST WISH IS STILL FOR THE PARENTS OF THIS COUNTRY TO BE THE PRIMARY TEACHERS OF SEX AND HUMAN RELATIONS TO THEIR CHILDREN.

AND I SAY THAT, KNOWING FULL WELL THAT THIS MAY BE AN ASSIGNMENT THAT SOME PARENTS SIMPLY CAN'T HANDLE. WHEN THAT'S THE CASE, THEN I BELIEVE THERE IS A COMPELLING SOCIAL NEED FOR OUR SCHOOLS, CHURCHES, SYNAGOGUES, AND OTHER COMMUNAL INSTITUTIONS TO DO WHATEVER THEY CAN TO PROVIDE OUR CHILDREN WITH THE MOST HELPFUL KINDS OF INFORMATION.

I WISH WE COULD SAY THAT, IF WE WANT TO, WE CAN BE IN TOTAL CONTROL OF A CHILD'S SEX EDUCATION. BUT THAT'S A PROBLEM BECAUSE INFORMATION ABOUT SEX SEEMS TO REACH CHILDREN IN THREE WAYS:

- * FROM GUIDANCE IN SEXUAL MATTERS OFFERED BY PARENTS...
- * FROM FORMAL PROGRAMS OF SOME KIND, SUCH AS A SCHOOL CURRICULUM.
- * AND FROM UNSTRUCTURED, UNPLANNED EXPERIENCES, ESPECIALLY THE ACCUMULATION OF SEXUAL FACT AND MYTH FROM THE MEDIA AND FROM OTHER CHILDREN.

YOU KNOW, OF COURSE, THAT THE COMPETITION FOR THE ATTENTION OF OUR CHILDREN IS QUITE SEVERE. CHILDREN ARE ALREADY GETTING A GREAT DEAL OF SEX-RELATED INFORMATION AT AN EARLY AGE AND QUITE OUTSIDE THE CIRCLE OF A FAMILY'S VALUES OR, I WOULD MAINTAIN, OUTSIDE THE VALUES OF THE COMMUNITY AS A WHOLE.

SOME RESEARCH WAS RECENTLY DONE ON THIS MATTER BY MICHIGAN STATE UNIVERSITY. THE RESEARCHERS FOUND, FOR EXAMPLE, THAT A LARGE NUMBER OF 9TH- AND 10TH-GRADE GIRLS WATCH BETWEEN 1 AND 2 HOURS OF SOAP OPERAS EVERY DAY AFTER SCHOOL.

AND WHAT ARE THEY VIEWING? THE RESEARCHERS REPORT THAT, AMONG OTHER THINGS, SEXUAL INTERCOURSE BETWEEN UNMARRIED PARTNERS IS SHOWN OR DISCUSSED ON MID-DAY SOAP OPERAS ON AN AVERAGE OF 1.56 TIMES AN HOUR. AMONG THE SOAPS THEY WATCH THE MOST, THE WORST OFFENDER WAS ALL MY CHILDREN.

IN THE EVENING, A LARGER NUMBER OF 9TH- AND 10TH-GRADE GIRLS AND BOYS WATCH 3 TO 4 HOURS OF TELEVISION. ON THOSE PRIME-TIME EVENING SHOWS, ACTS OF UNMARRIED INTERCOURSE ARE SHOWN OR DISCUSSED ON AN AVERAGE OF ONCE AN HOUR. AND THE WORST OFFENDER BY FAR IS DYNASTY.

THESE ARE NOT MY OPINIONS. THEY ARE, RATHER, THE RESULTS OF THE RESEARCH AT MICHIGAN STATE.

THE SAME RESEARCHERS ALSO FOUND THAT OVER 60 TO 70 PERCENT OF THOSE SAME 9TH- AND 10TH-GRADERS SAW THE TOP 5 "R"-RATED FILMS, IN WHICH SEXUAL INTERCOURSE BETWEEN UNMARRIED PARTNERS OCCURRED ON THE AVERAGE OF 8 TIMES PER FILM. THE WORST OFFENDERS -- WITH 15 SUCH ACTS PER FILM -- WERE PORKY'S II AND FAST TIMES AT RIDGEMONT HIGH, A MOVIE SO POPULAR AMONG YOUNG PEOPLE THAT IT HAS BEEN TURNED INTO A TELEVISION SERIES.

OUR CHILDREN DON'T LIVE IN A VACUUM, AS WE ALL KNOW. THEY LIVE IN A REAL WORLD OF PLEASURE AND DANGER, ALONG WITH THE REST OF US. BUT WE HAVE SOME EXPERIENCE WITH IT AND SOME SENSE OF HOW TO SURVIVE IN IT WITH OUR LIVES AND OUR VALUES INTACT. AND I BELIEVE, THEREFORE,

THAT EACH OF US -- IN OUR HOMES OR IN OUR SCHOOLS -- HAS THE MORAL RESPONSIBILITY TO PASS THAT INFORMATION ON TO OUR CHILDREN.

I CAN TELL YOU THAT THE GOVERNMENT -- THE U.S. PUBLIC HEALTH SERVICE IN PARTICULAR -- IS PLEDGED TO HELP IN THIS EFFORT TO THE EXTENT THAT IT CAN. AS THE SURGEON GENERAL, I HAVE TO TAKE THE LEAD POSITION AND THAT'S WHAT I'VE DONE. BUT THERE ARE LIMITS ON WHAT WE IN GOVERNMENT CAN AND OUGHT TO DO...LIMITS THAT ARE CLEAR ENOUGH IN AMERICAN LAW AND TRADITION.

BUT THE TASK OF PROVIDING AUTHORITATIVE AIDS EDUCATION TO OUR CHILDREN -- IN THE OVERALL CONTEXT OF EDUCATION ABOUT HUMAN RELATIONSHIPS -- IS NOT PRIMARILY THE TASK OF YOUR GOVERNMENT. ITS YOUR OWN. YOU CAN'T LEAVE IT BY DEFAULT TO THE MOVIES, TELEVISION, OR THE STREET-CORNER.

NOT IF YOU VALUE THE YOUNG LIVES THAT ARE NOW AT STAKE.

THIS HAS BEEN A GRIM MESSAGE AND I GUESS I AM A GRIM COURIER. I ONLY HOPE THAT EVERY AMERICAN WHO HEARS OR READS MY MESSAGE, WILL BELIEVE IT AND DO HIS OR HER PART TO STOP THE SPREAD OF AIDS...PROTECT AND SAVE THE LIVES OF PEOPLE AT RISK, INCLUDING UNSUSPECTING YOUNG PEOPLE...AND RETURN HUMAN SEXUALITY BACK TO ITS RIGHTFUL PLACE: PART OF THE TOTAL COMPLEX OF HUMAN, CARING INTERPERSONAL RELATIONS.

THANK YOU.